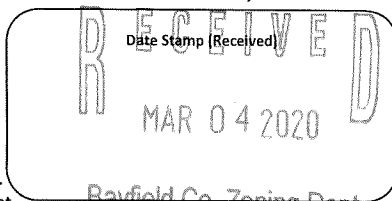


SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:

Bayfield County  
Planning and Zoning Depart.  
PO Box 58  
Washburn, WI 54891  
(715) 373-6138

APPLICATION FOR PERMIT  
BAYFIELD COUNTY, WISCONSIN



|              |                                  |
|--------------|----------------------------------|
| Permit #:    | 20-0081                          |
| Date:        | 5-14-20                          |
| Amount Paid: | \$1000 3-4-2020<br>\$1500 5-7-20 |
| Refund:      |                                  |

INSTRUCTIONS: No permits will be issued until all fees are paid.  
Checks are made payable to: Bayfield County Zoning Department.  
DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.

Bayfield Co. Zoning Dept.

FILL OUT IN INK (NO PENCIL)

|   |   |   |   |
|---|---|---|---|
| TYPE OF PERMIT REQUESTED → <input checked="" type="checkbox"/> LAND USE <input type="checkbox"/> SANITARY <input type="checkbox"/> PRIVY <input type="checkbox"/> CONDITIONAL USE <input type="checkbox"/> SPECIAL USE <input type="checkbox"/> B.O.A. <input type="checkbox"/> OTHER |   |   |   |
| Owner's Name:<br>Richard A. Wood  | Mailing Address:<br>18410 Jackson St. NE Cedar MN 55011 | City/State/Zip:<br>Cedar MN 55011   | Telephone:<br>952-454-4290  |
| Address of Property:<br>11155 N. Long Lake Rd.  | City/State/Zip:<br>Iron River WI 54847                  |   | Cell Phone:<br>952-454-4290   |
| Contractor:<br>Troy Klein/Klein Carpentry   | Contractor Phone:<br>920-470-2579                       | Plumber:<br>Matt Lebato<br>Blakeman   | Plumber Phone:<br>715-682-6050  |
| Authorized Agent: (Person Signing Application on behalf of Owner(s))<br>  | Agent Phone:<br>920-470-2579                            | Agent Mailing Address (include City/State/Zip):<br>P.O. Box 98 Port Wing WI 54865 | Written Authorization<br>Attached <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| PROJECT LOCATION<br>1/4, 1/4  | Legal Description: (Use Tax Statement)<br>Attached      | Tax ID#<br>30526  | Recorded Document: (Showing Ownership)<br>2017R 568560  |
| Gov't Lot<br>1  | Lot(s)<br>3   | CSM<br>248  | Vol & Page<br>1.3 P. 23   |
| Section<br>35   | Township<br>48  | N, Range<br>08 W  | Lot Size<br>1.450   |

|   |   |   |  |   |
|---|---|---|--|---|
| <input checked="" type="checkbox"/> Shoreland | <input type="checkbox"/> Is Property/Land within 300 feet of River, Stream (incl. Intermittent) Creek or Landward side of Floodplain? If yes---continue → | Distance Structure is from Shoreline : _____ feet | Is your Property in Floodplain Zone? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Are Wetlands Present? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
|   | <input checked="" type="checkbox"/> Is Property/Land within 1000 feet of Lake, Pond or Flowage If yes---continue →  | Distance Structure is from Shoreline : 180 feet   |  |   |
| <input type="checkbox"/> Non-Shoreland        |   |   |  |   |

| Value at Time of Completion<br>* include donated time & material | Project  | # of Stories                                | Foundation                                     | Total # of bedrooms on property       | What Type of Sewer/Sanitary System Is on the property?                                    | Type of Water on property                |
|--|--|---|--|---------------------------------------|---|--|
| \$500,000  | <input checked="" type="checkbox"/> New Construction | <input checked="" type="checkbox"/> 1-Story | <input checked="" type="checkbox"/> Basement   | <input checked="" type="checkbox"/> 1 | <input type="checkbox"/> Municipal/City   | <input type="checkbox"/> City            |
|  | <input type="checkbox"/> Addition/Alteration         | <input type="checkbox"/> 1-Story + Loft     | <input type="checkbox"/> Foundation            | <input type="checkbox"/> 2            | <input checked="" type="checkbox"/> (New) Sanitary Specify Type: Conventional             | <input checked="" type="checkbox"/> Well |
|  | <input type="checkbox"/> Conversion                  | <input type="checkbox"/> 2-Story            | <input type="checkbox"/> Slab                  | <input type="checkbox"/> 3            | <input type="checkbox"/> Sanitary (Exists) Specify Type: _____                            | <input type="checkbox"/>                 |
|  | <input type="checkbox"/> Relocate (existing bldg)    |   |  |                                       | <input type="checkbox"/> Privy (Pit) or <input type="checkbox"/> Vaulted (min 200 gallon) |  |
|  | <input type="checkbox"/> Run a Business on Property  | WALK OUT                                    | Use  | <input type="checkbox"/> None         | <input type="checkbox"/> Portable (w/service contract)                                    |  |
|  | <input type="checkbox"/>                             |   | <input checked="" type="checkbox"/> Year Round |                                       | <input type="checkbox"/> Compost Toilet   |  |
|  |  |   |  | <input type="checkbox"/> None         |   |  |

|   |            |           |            |
|---|------------|-----------|------------|
| Existing Structure: (if permit being applied for is relevant to it) | Length:    | Width:    | Height:    |
| Proposed Construction:  | Length: 75 | Width: 62 | Height: 28 |

| Proposed Use  | ✓                                   | Proposed Structure  | Dimensions     | Square Footage |
|---|-------------------------------------|---|----------------|----------------|
| <input checked="" type="checkbox"/> Residential Use | <input type="checkbox"/>            | Principal Structure (first structure on property)   | ( X )          |                |
|   | <input checked="" type="checkbox"/> | Residence (i.e. cabin, hunting shack, etc.)   | ( 45 X 33 )    | 1444/1485      |
|   |                                     | with Loft   | ( X )          |                |
|   |                                     | with a Porch  | ( 16.5 X 6.5 ) | 107            |
|   |                                     | with (2nd) Porch  | ( X )          |                |
|   |                                     | with a Deck   | ( 54 X 12 )    | 648            |
| <input type="checkbox"/> Commercial Use             |                                     | with (2nd) Deck   | ( X )          |                |
|   |                                     | with Attached Garage  | ( 30 X 25 )    | 750            |
| <input type="checkbox"/> Municipal Use              | <input type="checkbox"/>            | Bunkhouse w/ ( <input type="checkbox"/> sanitary, or <input type="checkbox"/> sleeping quarters, or <input type="checkbox"/> cooking & food prep facilities ) | ( X )          |                |
|   | <input type="checkbox"/>            | Mobile Home (manufactured date) _____   | ( X )          |                |
|   | <input type="checkbox"/>            | Addition/Alteration (explain) _____   | ( X )          |                |
|   | <input type="checkbox"/>            | Accessory Building (explain) _____  | ( X )          |                |
|   | <input type="checkbox"/>            | Accessory Building Addition/Alteration (explain) _____  | ( X )          |                |
|   | <input type="checkbox"/>            | Special Use: (explain) _____  | ( X )          |                |
|   | <input type="checkbox"/>            | Conditional Use: (explain) _____  | ( X )          |                |
|   | <input type="checkbox"/>            | Other: (explain) _____  | ( X )          |                |

FAILURE TO OBTAIN A PERMIT OR STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information. I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection.

Owner(s):   
(If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

Date: 3-1-2020

Authorized Agent:   
(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Date: 3-1-2020

Address to send permit: P.O. Box 98 Port Wing WI 54865

Attach  
Copy of Tax Statement  
If you recently purchased the property send your Recorded Deed

Draw or Sketch your Property (regardless of what you are applying for)

Fill Out in Ink – NO PENCIL

- (1) Show Location of: Proposed Construction
- (2) Show / Indicate: North (N) on Plot Plan
- (3) Show Location of (\*): (\*) Driveway and (\*) Frontage Road (Name Frontage Road)
- (4) Show: All Existing Structures on your Property
- (5) Show: (\*) Well (W); (\*) Septic Tank (ST); (\*) Drain Field (DF); (\*) Holding Tank (HT) and/or (\*) Privy (P)
- (6) Show any (\*): (\*) Lake; (\*) River; (\*) Stream/Creek; or (\*) Pond
- (7) Show any (\*): (\*) Wetlands; or (\*) Slopes over 20%

See Attached

Please complete (1) – (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

(8) Setbacks: (measured to the closest point)

| Description                                 | Measurement  | Description                                      | Measurement                       |
|---|--------------|--|-----------------------------------|
| Setback from the Centerline of Platted Road | 195 164 Feet | Setback from the Lake (ordinary high-water mark) | 183 171 Feet                      |
| Setback from the Established Right-of-Way   | 900 133 Feet | Setback from the River, Stream, Creek            | Feet                              |
|   |              | Setback from the Bank or Bluff                   | Feet                              |
| Setback from the North Lot Line             | 35 165 Feet  | Setback from Wetland                             | 160 Feet                          |
| Setback from the South Lot Line             | 35 153 Feet  | 20% Slope Area on the property                   | X Yes <input type="checkbox"/> No |
| Setback from the West Lot Line              | 133 35 Feet  | Elevation of Floodplain                          | Feet                              |
| Setback from the East Lot Line              | 171 35 Feet  |  |                                   |
| Setback to Septic Tank or Holding Tank      | 20 170 Feet  | Setback to Well                                  | 195 Feet                          |
| Setback to Drain Field                      | 40 100 Feet  |  |                                   |
| Setback to Privy (Portable, Composting)     | Feet         |  |                                   |

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.

For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

|   |   |   |   |   |
|---|---|---|---|---|
| Issuance Information (County Use Only)  |   | Sanitary Number: 20-315   | # of bedrooms:  | Sanitary Date:  |
| Permit Denied (Date):   |   | Reason for Denial:  |   |   |
| Permit #: 20-0081   |   | Permit Date: 5-14-20  |   |   |
| Is Parcel a Sub-Standard Lot  | <input type="checkbox"/> Yes (Deed of Record)                       | <input type="checkbox"/> No   | Mitigation Required   | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| Is Parcel in Common Ownership   | <input type="checkbox"/> Yes (Fused/Contiguous Lot(s))              | <input type="checkbox"/> No   | Mitigation Attached   | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| Is Structure Non-Conforming   | <input type="checkbox"/> Yes  | <input type="checkbox"/> No   | Affidavit Required  | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| Granted by Variance (B.O.A.)  |   | Previously Granted by Variance (B.O.A.)                                     |   |   |
| <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Case #:   |   | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Case #: |   |   |
| Was Parcel Legally Created  | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | Were Property Lines Represented by Owner                                    | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |   |
| Was Proposed Building Site Delineated   | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | Was Property Surveyed   | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |   |
| Inspection Record: Site surveyed and well-marked. Existing structure appears to be a screen house / storage. Proposed house appears code compliant.   |   |   | Zoning District ( R1 )<br>Lakes Classification ( 2 )                |   |
| Date of Inspection: March 2020  |   | Inspected by: Todd Norwood  |   | Date of Re-Inspection:  |
| Condition(s): Town, Committee or Board Conditions Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No – (If No they need to be attached.)<br>A Uniform Dwelling Code (UDC) permit must be obtained from the locally contracted UDC inspection agency prior to construction. Must meet and maintain setbacks, screen Existing Screen House not for human habitation without additional permitting. |   |   |   |   |
| Signature of Inspector: Todd Norwood  |   |   | Date of Approval: 5-13-20   |   |
| Hold For Sanitary: <input type="checkbox"/>   | Hold For TBA: <input type="checkbox"/>                              | Hold For Affidavit: <input type="checkbox"/>                                | Hold For Fees: <input type="checkbox"/>                             | <input type="checkbox"/>  |

Town, City, Village, State or Federal  
Permits May Also Be Required

LAND USE – X  
SANITARY – 20-31S  
SIGN –  
SPECIAL –  
CONDITIONAL –  
BOA –

# BAYFIELD COUNTY

# PERMIT

WEATHERIZE AND POST THIS PERMIT  
ON THE PREMISES DURING CONSTRUCTION

No. **20-0081** Issued To: **Richard Wood**

Location: -  $\frac{1}{4}$  of -  $\frac{1}{4}$  Section **35** Township **48** N. Range **8** W. Town of **Tripp**

Par in

Gov't Lot **1** Lot Block Subdivision CSM#

For: **Residential Use:** [ **1- Story; Residence (45' x 33') = 1,485 sq. ft.;** **Porch (16.5' x 6.5') = 107 sq. ft.;**  
**Deck (54' x 12') = 648 sq. ft.; Attached Garage (30' x 25') = 750 sq. ft. ]**

(Disclaimer): Any future expansions or development would require additional permitting.

**Condition(s):** A uniform dwelling code permit must be obtained from the locally contracted UDC inspection agency prior to construction. Must meet and maintain setbacks. Existing screen house not for human habitation without additional permitting.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

**NOTE:** This permit expires one year from date of issuance if the authorized construction work or work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed or if any prohibitory conditions are violated.

**Todd Norwood**

Authorized Issuing Official

**May 14, 2020**

Date